

| POSITION                  | INITIALS  | ID NO. | DATE     |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION         | <i>Sm</i> |        | 04-19-01 |
| O.I.P.E. CLASSIFIER       |           | 10     | 9-27-01  |
| FORMALITY REVIEW          | <i>MH</i> | 920    | 10-15-01 |
| RESPONSE FORMALITY REVIEW |           |        |          |

09/954,603

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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